


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90418 022 ***150.00

DOCUMENT # L10687

1. Entity Name
APL LOGISTICS PROPERTIES, INC.



Principal Place of Business
1301 RIVERPLACE BLVD
1200
JACKSONVILLE, FL 32207 US

Mailing Address
TAX DEPT
1111 BROADWAY
OAKLAND, CA 94607 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

04062006 Chg-P CR2E034 (11/05)

City & State

4. FEI Number
59-2966786

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDCE Delete
 NAME HICKLER, HANS
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE _____ Change Addition
 NAME _____
 STREET ADDRESS _____
 CITY-ST-ZIP _____

TITLE TC Delete
 NAME WEST, NEAL E
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE ASSISTANT TREASURER Change Addition
 NAME DOUGLAS CANNON
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE SD Delete
 NAME HASSE, ANN F
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE _____ Change Addition
 NAME _____
 STREET ADDRESS _____
 CITY-ST-ZIP _____

TITLE CFOD Delete
 NAME GLYNIS, BRYAN
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE REGIONAL FINANCE OFFICER Change Addition
 NAME SDH KAM GIAP
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE VPD Delete
 NAME VILLALON, WILLIAM
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94607

TITLE PRESIDENT/CEO/DIRECTOR Change Addition
 NAME _____
 STREET ADDRESS _____
 CITY-ST-ZIP _____

TITLE AS Delete
 NAME HUEGEL, PETER A.V.
 STREET ADDRESS 1111 BROADWAY
 CITY-ST-ZIP OAKLAND, CA 94067

TITLE _____ Change Addition
 NAME _____
 STREET ADDRESS _____
 CITY-ST-ZIP _____

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS CANNON 4/13/06 SID-272-8000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #